

**EXHIBIT C**

**PART 1: CLAIMING PARTY INFORMATION**

NAME:

TWO ALLEGHENY CENTER

Name of individual claimant (first, middle and last name) or business claimant

SOCIAL SECURITY NUMBER (Individual Claimants):

(last four digits of SSN)

F.E.I.N. (Business Claimants)

Other names by which claiming party has been known (such as maiden name or married name):

First

MI

Last

First

MI

Last

GENDER: ☐ MALE ☐ FEMALE

Mailing Address:

Street Address

City

Country

State

Zip Code

(Province) (Postal Code)

**PART 2: ATTORNEY INFORMATION**

The claiming party's attorney, if any (You do not need an attorney to file this form):

Law Firm Name:

SPEIGHTS &amp; RUNYAN

Name of Attorney:

AMANDA

First

MI

Last

G STEINMEYER

Mailing Address:

P O BOX 685 - 200 JACKSON AVENUE EAST

Street Address

HAMPTON

City

SC

State

29924

Zip Code

(Province) (Postal Code)

Telephone:

(803) 943-4444

Area Code

REC'D MAR 3 1 2003

WR Grace PD.12.48.2354

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011036-000002

**PART 3: PROPERTY INFORMATION****A. Real Property For Which A Claim Is Being Asserted**

1. What is the address of the real property for which a claim is being asserted (referred to herein as "the property")?

ALLEGHENY CENTER

Street Address

PITTSBURGH

City

PA

State

15212

Zip Code

(Province) (Postal Code)

UNITED STATES

Country

2. Are you completing an Asbestos Property Damage Proof of Claim Form for any other real property other than the one listed at "1" above?

☒ Yes ☐ No

3. Do you currently own the property listed in Question 1, above?

☒ Yes ☐ No

4. When did you purchase the property?

- - 1981

Month Day Year

5. What is the property used for (check all that apply)

☐ Owner occupied residence☐ Residential rental☒ Commercial☐ Industrial Specify:☐ Other Specify:

6. How many floors does the property have?

013

7. What is the approximate square footage of the property?

251780

8. When was the property built?

☐ Before 1969☒ 1969 - 1973☐ After 1973

9. What is the structural support of the property?

☐ Wood frame☐ Structural concrete☐ Brick☒ Steel beam/girder☐ Other Specify:

10. Have you or has someone on your behalf completed any interior renovations on the property which affected any asbestos on the property?

☒ Yes ☐ No

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**A. Real Property For Which A Claim Is Being Asserted (continued)**

If yes, please specify the dates and description of such renovations.

Year			

Description MULTIPLE RENOVATIONS OVER VARIOUS YEARS

Year			

Description

Year			

Description

11. To the best of your knowledge, have any other interior renovations been completed on the property during any other period of time which affected any asbestos on the property?

☒ Yes      ☐ No

If yes, please specify the dates and descriptions of such renovations.

Year			

Description MULTIPLE RENOVATIONS OVER VARIOUS YEARS

Year			

Description

Year			

Description

**B. Claim Category**

12. For which category are you making a claim on the property?

☒ Category 1: Allegation with respect to asbestos from a Grace product in the property

☐ Category 2: Allegation with respect to one of Grace's vermiculite mining, milling or processing operations

- If you checked Category 1 in question 12, complete section C.
- If you checked Category 2 in question 12, complete section D.

**C. Category 1 Claim: Allegation With Respect To Asbestos From A Grace Product In The Property**

13. For what alleged asbestos-containing product(s) are you making a claim?

☒ Monokote-3 fireproofing insulation

☐ Other      Specify:

(For a list of the brand names under which Grace manufactured products that may have contained commercially added asbestos, see Exhibit 2 to the Claims Bar Date Notice provided with this Proof of Claim Form.)

14. When did you or someone on your behalf install the asbestos containing product(s) in the property?

Year			

☒ I did not install the product(s)

15. If you or someone on your behalf did not install the asbestos containing product(s), to the best of your knowledge, when was/were the product(s) installed?

1	9	7	0
Year			

☐ Don't know.

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16. Do you have documentation relating to the purchase and/or installation of the product in the property?

☒ Yes ☐ No

If Yes, attach all such documents. If the documents are too voluminous to attach, attach a summary of the documents indicating the name of each document, date of each document, a brief description of the document, the location of the document, and who has possession and control of the document.

If you provide a summary of documents rather than the documents themselves, you are required to consent to the production and release of those documents to Grace upon Grace's further request.

17. If you do not have any such documents, explain why not and indicate who may have possession or control of such documents with respect to the property.

NOT APPLICABLE

18. When did you first know of the presence of asbestos in the property of the Grace product for which you are making this claim?

2003

Year

Please attach all documents relating or referring to the presence of asbestos in the property for which you are making this claim. If the documents are too voluminous to attach, attach a summary of the documents indicating the name of each document, date of each document, a brief description of the document, the location of the document, and who has possession and control of the document.

If you provide a summary of documents rather than the documents themselves, you are required to consent to the production and release of those documents to Grace upon Grace's further request.

19. How did you first learn of the presence of asbestos in the property of the Grace product for which you are making this claim?

SEE ATTACHED

20. When did you first learn that the Grace product for which you are making this claim contained asbestos?

2003

Year

21. How did you first learn that the Grace product for which you are making the claim contained asbestos?

SEE ATTACHED

22. Have you or someone on your behalf made an effort to remove, contain and/or abate the Grace product for which you are making this claim?

☒ Yes ☐ No

If Yes, attach all documents relating or referring to such efforts. If the documents are too voluminous to attach, attach a summary of the documents indicating the name of each document, date of each document, a brief description of the document, the location of the document, and who has possession and control of the document.

If you provide a summary of documents rather than the documents themselves, you are required to consent to the production and release of those documents to Grace upon Grace's further request.

23. If you do not have any such documents, explain why not and indicate who may have possession and control of such documents with respect to the property.

SEE ATTACHED

24. If you or someone on your behalf did not make an effort to remove, contain and/or abate the Grace product(s) for which you are making a claim, to the best of your knowledge, did anyone else make such an effort?

☒ Yes ☐ No

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25. If you responded Yes to question 22, or 24, and you have not supplied documents, please specify the dates and descriptions of any such efforts.

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Year

Description VARIOUS YEARS, NUMEROUS PROJECTS

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Year

Description

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Year

Description

26. Have you or anyone on your behalf ever conducted any testing or sampling for the presence of asbestos or other particulates in the property?

☒ Yes☐ No

If Yes, Attach All Documents Related To Any Testing Of The Property.

27. If you responded Yes to question 26, but you have not provided documents, indicate who may have possession or control of such testing documents or where such documents may be located.

SEE ATTACHED

28. If you or someone on your behalf did not conduct any testing or sampling for the presence of asbestos or other particulates on the property, to the best of your knowledge, did anyone else conduct such testing or sampling with respect to the property?

☐ Yes☐ No

NOT APPLICABLE

29. If you responded Yes to question 26, or 28, and you have not supplied related documents, please describe when and by whom and the type of testing and/or sampling (e.g. air, bulk and dust sampling).

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Year

Company/Individual VARIOUS YEARS, NUMEROUS SAMPLES

Type of testing:

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Year

Company/Individual

Type of testing:

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Year

Company/Individual

Type of testing:

30. Has the Grace product or products for which you are making this claim ever been modified and/or disturbed?

☒ Yes☐ No

31. If yes, specify when and in what manner the Grace product or products was modified and/or disturbed?

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Year

Description AFFECTED BY NUMEROUS CUSTODIAL AND MAINTENANCE ACTIVITIES AND RENOVATIONS.

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Year

Description

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Year

Description

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**PART 4: ASBESTOS LITIGATION AND CLAIMS****A. INTRODUCTION**

1. Has any asbestos-related property damage lawsuit or claim been filed against Grace on behalf of this claiming party relating to the property for which you are making this claim?

☐ No  
☒ Yes – lawsuit  
☐ Yes – non-lawsuit claim (other than a workers' compensation claim)

2. Has any asbestos-related property damage lawsuit or claim been filed against any other party on behalf of this claiming party relating to the property for which you are making this claim?

☐ No  
☒ Yes – lawsuit  
☐ Yes – non-lawsuit claim (other than a workers' compensation claim)

*If an asbestos-related property damage lawsuit has been filed by or on behalf of this claiming party relating to the property for which you are making a claim, complete Section B. below.*

*If an asbestos-related property damage non-lawsuit claim has been made by or on behalf of this claiming party relating to the property for which you are making a claim, complete Section C. on the following page.*

**B. LAWSUITS**

1. Please provide the following information about each asbestos-related property damage lawsuit which has been filed relating to the property for which you are making this claim or attach a copy of the face page of each complaint filed.

a. Caption ANDERSON MEMORIAL HOSPITAL, ON BEHALF OF ITSELF & OTHERS SIMILARLY SITUATED  
V. W.R. GRACE & COMPANY ET AL

b. Court where suit originally filed: HAMPTON SC Docket No.: 92CP25279  
County/State

c. Date filed: 12 - 23 - 1992  
Month Day Year

a. Caption

b. Court where suit originally filed:  Docket No.:   
County/State

c. Date filed:  -  -   
Month Day Year

a. Caption

b. Court where suit originally filed:  Docket No.:   
County/State

c. Date filed:  -  -   
Month Day Year

(Attach additional pages if necessary.)

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**C. NON-LAWSUIT CLAIMS**

1. If the claiming party has made any claims relating to the property for which you are making a claim (including administrative claims) against anyone, that was not filed with a court of law, please provide the following information for each claim:

a. Description of claim:

b. Date submitted:  -  -   
Month Day Year

c. Name of entity to whom claim was submitted:  
☐ Grace  
☐ Other   
 Name of Entity

a. Description of claim:

b. Date submitted:  -  -   
Month Day Year

c. Name of entity to whom claim was submitted:  
☐ Grace  
☐ Other   
 Name of Entity

a. Description of claim:

b. Date submitted:  -  -   
Month Day Year

c. Name of entity to whom claim was submitted:  
☐ Grace  
☐ Other   
 Name of Entity

**PART 5: SIGNATURE PAGE**

All claims must be signed by the claiming party.

I have reviewed the information submitted on this proof of claim form and all documents submitted in support of my claim. I declare, under penalty of perjury,\* that the above statements are true, correct, and not misleading.

**CONSENT TO RELEASE OF RECORDS AND INFORMATION:** To the extent that I have produced a summary rather than the documents themselves as requested above or indicated who has possession and control of certain documents, I hereby authorize and request that all other parties with custody of any documents or information concerning my property damage or the information contained in this Form, upon the reasonable request of Grace or Grace's representative, with a copy to the claiming party, disclose any and all records to Grace or to Grace's representative.

  
 SIGNATURE OF CLAIMANT AMANDA G. STEINMEYER

-  -   
Month Day Year

\*The penalty for presenting a fraudulent claim is a fine up to \$500,000.00 or imprisonment up to 5 years, or both.  
 18 U.S.C. §§ 152 & 3571.

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